

(0.018; 90%CI). The one- and two-period lagged PAT_AP (0.451 & 0.297; 99%CI) and LIFEXP65 (0.018; 99%CI) were highly significant and PHARM_R&D (0.166; 90%CI) was marginally significant. **CONCLUSIONS:** In contrast to effects in HCE in previous studies there is an ageing effect (pull factor) causing rising EPD as well as for pharmaceutical innovations. Additionally, we found a push factor, namely R&D expenditures of pharmaceutical industry causing increasing EPD and innovations. Increasing doctors' consultations lead to decreasing EPD maybe caused by successful application of lower medical therapies or by additional following non-medical therapies which are not affecting EPD.

PIH12

THE DETERMINANTS OF DRUGS PRESCRIPTION FOR CHILDREN IN GENERAL PRACTICE

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In France, 97% of children under age of 3 turn to a GP at least once a year. The GP/child encounter benefits from a particular status -no gate keeper constraint, baby extra fee- even if neither the nature nor the economic burden of this activity have been yet studied. **OBJECTIVES:** This study aimed to: 1/ analyse the nature of the activity for children in General Practice 2/ find out the determinants of the prescription decision. **METHOD:** We got data from a representative sample of 922 French GPs (BKL-Thalès panel). Information was directly collected on the basis of 60 consecutive visits per GP, through a patient management software. We only picked children visits. In addition to standard GPs and patients characteristics, other data were also collected on the child: health insurance status, status in the GP's practice: regular / new) and on the visit (length, reasons for encounter, prescription of drugs...). We use the Hierarchical Linear Models to identify the determinants of the prescription at the respective level of children and GPs. **RESULTS:** Activity is highly concentrated: Upper Respiratory Tract Infections represent 54.8% of the 6652 visits. Obviously URTI favours prescription decision by 3.96(OR) [$p < 0.0001$] and more generally an acute pathology by 3.26(OR) [$p < 0.0001$]. GPs prescribe on average 2 medicines per visit (even if 25.1% did not lead to any prescription) but surprisingly male prescribe much more than female: 2.01(OR) [$p < 0.0062$]. Long visits (over 15 minutes) lead more often to a drugs prescription: 1.80(OR) [$p < 0.0001$]. Furthermore, a child under age of 6 is more likely to receive a drugs prescription 1.66(OR) [$p < 0.0001$]. **CONCLUSION:** The diagnoses and the child age clearly explain drugs prescription and unexpectedly GPs sex takes significantly part in the decision of prescription.

PIH13

PHARMACOECONOMIC ASPECTS OF REFORMS OF PHARMACEUTICAL SECTOR: MONTENEGRO EXPERIENCE

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OBJECTIVES: Monte Negro Republic health fund is the only institution in Monte Negro dealing with health insurance. It covers approximately 640,000 inhabitants. As the drug expenses

in Monte Negro reached 30% of total health expenses during 2003, informational system (IS) in outpatient health practice was introduced. This system enabled the total control and follow up in area of use of drugs covered financially by the health fund. **METHODS:** IS bind together pharmacies, health care institutions, databases of persons with health insurance, drugs, and health care providers. Through unique code system automatic information flow imported through bar code was enabled. **RESULTS:** In the first year after introduction of IS (2004) the 3.6 mil of EUR was saved, what is 30.6% less than in 2000 year. During the 2005 year €2.2 million, or 18.76% less amount of money was spent than in 2002 year. The increase of expenditure for the drugs in 2005 when compare with 2004 could be explained by better supply of pharmacies during 2005. The next reason was the increase of number of insured persons for 6.4% and the third reason was weaker control of drug use and absence of interventions after analysis of drug use. During 2005, the biggest percentage of money from the fund was spent on insured patients older than over 65 years, with group C being the first place, being 31.3% of total expenses. **CONCLUSIONS:** Introduction of informational system rationalized outpatient drug use and enabled application of international standards. The greatest decrease of drug use was realized during the first year after the introduction of reforms. The biggest financial spenders are patients older than 65 years, and the group C of drugs. The permanent control and intervention in the field of drug use are necessary.

PIH14

DETECTION OF SEMANTIC AMBIGUITY IN THE ITALIAN CHILD-FRIENDLY EQ-5D VERSION

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A very difficult objective to be reached in the field of outcome research is to measure Quality of Life (QoL) in paediatric populations. Non negligible semantic ambiguity has been shown to characterize health perceptions and descriptions in developmental age. **OBJECTIVE:** As a part of the project aimed at developing a valid and reliable Italian version of EQ-5D suitable for children—i.e. the Italian Child-Friendly EQ-5D (CF-EQ-5D) project—statistically based lexical analyses are applied. The aim of the analyses is to identify the semantic field associated to each item of the instrument, with the final purpose of formulating comprehensible, valid, unambiguous, and reliable items in Italian CF-EQ-5D. **METHODS:** Thirty children/adolescents (aged 8–15 years, all native speakers, resident in different parts of Italy), gave their informed consent and self-completed an Italian version of CF-EQ-5D (from a forward-backward-forward translation method). Then participants were submitted to face-to-face and tape-recorded cognitive interviews and were invited to generate word associations in response to the core words of each item. **RESULTS:** The resulting textual corpus (normalized and lexicalized) is submitted to descriptive and multivariate statistical analyses fit for textual data. An analysis of lexical specificity is calculated in order to illustrate the general features of the vocabulary generated by respondents. In a second step, Multiple Correspondence Analysis is performed on a words*contexts matrix, with socio-demographic characteristics of the participants as illustrative variables. **CONCLUSIONS:** Preliminary outcomes suggest that children and adolescents associate non-univocal semantic fields to core aspects of the health-related lexicon. Implications for the developing and improving of the Italian